

his direction. The results of experiments upon them and upon himself under similar conditions were of a most varied kind, but the general results appeared to be that the tissue-waste was to a large extent retarded; that with little or no previous preparation long journeys and most arduous tasks could be undertaken without apparent evil after-effects; that the restorative effects in states of mental and physical exhaustion were well marked; and that these sustaining and recuperative properties were retained. Further, that the chief results obtained were constant and rarely variable. But even in his comparatively limited experience, maté and its alkaloid seem to act somewhat differently in different individuals; in some the muscular, in others the nervous, and in others again the digestive system were chiefly affected.

As a substitute for tea, in patients who are great tea-drinkers, and who suffer from sleeplessness, headache, and constipation, maté was prescribed with success in a few cases. The insomnia, headache, and constipation were all relieved.

In seven other patients who suffered from severe nervous headaches, generally associated with constipation, and with whom tea and coffee appeared to disagree, it proved serviceable.—*British Medical Journal*, July 26, 1890.

ALLEGED DEATH FROM THE APPLICATION OF AN ARSENICAL PLASTER.

In the *British Medical Journal* of July 26, 1890, two cases of death are reported following the use of arsenical plaster over tumors. In both cases their use was at the instance of irregular practitioners.

BIBORATE OF SODIUM IN EPILEPSY.

This treatment of epilepsy has been in use by some practitioners several years, and recently DIJOU has employed it in twenty-five cases of epilepsy in which the bromides had not been successful. The treatment was continued from four to seven months, and the dose varied from fifteen to ninety grains a day. In one case there was complete recovery, and eighteen were relieved. There seems to be little question that by means of borax we are able to diminish the number of attacks in many cases of epilepsy which do not yield to the bromide treatment.

The following formula is recommended:

R—Biborate of sodium, in powder 3ijss.
 Glycerin 3jss.
 Syrup of bitter orange 3ij.—M.
 A tablespoonful contains 30 grains.

—*Mercure Médical*, July 19, 1890.

THE TREATMENT OF DROPSY.

At a recent meeting of the Society of Medicine in Berlin, DR. FURBRINGER discussed the treatment of cardiac and renal dropsy. The fluid could be got rid of in four ways: 1, by the sweat-glands; 2, by the kidneys; 3, by the intestines; 4, by surgical means.

In cardiac dropsy diuretics hold the first place as does diaphoresis in dropsy of renal origin. In renal dropsy the speaker used heat as a diaphoretic; the chief contra-indication to its employment is cardiac weakness with dyspnoea. Pilocarpin had been abandoned on account of the dangerous symptoms sometimes caused by it.

Among diuretics digitalis is still the sovereign remedy, and it was of service also in renal dropsy and even in glomerulo-nephritis, for here cardiac debility often played a part.

In cases in which he had failed to obtain benefit from digitalis either in the form of infusion, powder, or pill, he had obtained excellent results with acetum digitalis in combination with wine of pepsin.

Drugs such as adonis, convallamarin, blatta, and spartein are superfluous; they too often failed, and there were frequently unpleasant concomitant effects produced by their employment. With lactose he had had no success, but to the following he gives some commendation: strophanthus, caffeine, theobromine, calomel, and the group of saline diuretics. The action of caffeine on the central nervous system was disagreeable, but this might be avoided by the use of sodio-salicylate of theobromine, or diuretine.

When drastic purgatives are employed the patient should be strong and have a good pulse. In transudating into cavities he believed in not puncturing too early.—*The Medical Press*, April 23, 1890.

HYPNOTICS.

The Report of the Therapeutic Committee of the British Medical Association on the use of sulphonal, paraldehyde, and chloralamide, is summarized as follows:

Attention was directed especially to the dose. Whether sleep is produced with certainty, how soon it comes on, and how long it continues.

Dangerous or disagreeable effects produced. Whether the drug loses its effect.

Sulphonal: In thirty-two cases, twenty grains were given in eleven instances, once at night. Sleep came on in half an hour to three hours; in one case in five hours, and in another in nine hours. A second dose on the succeeding night in one case produced sleep in five minutes. Sleep lasted in four cases all night; in four cases six hours; and in three cases one or two hours. With twenty-five grains (four cases) sleep came on in two hours, and lasted six hours, or all night. With ten and fifteen grains less sleep was produced, and in a case of pneumonia (fifteen grains) there was no sleep after the drug. The few cases (seven in all) in which thirty, forty, and sixty grains were given, showed that these doses did not possess greater hypnotic effect than a dose of twenty grains; as regards disagreeable after-effects, in six out of ten cases in which twenty grains had been given, disagreeable after-effects were noted; drowsiness next day was noted six times; giddiness four times; headache and incoördination of gait, each twice. In four cases in which ten grains had been given, drowsiness was noted once; in five cases with fifteen grains, drowsiness was noted twice and giddiness twice; with twenty-five grains (four cases), drowsiness was noted twice, giddiness once, headache once. In seven cases, with thirty to sixty grains, drowsiness was noted four